

Daily Meal Count Form for the Seamless Summer Option (SSO)

Note: If the site serves more than 150 children, use this additional page and print the form two-sided. If the site serves 150 children or less, use only page 1.

Site name: _____ Date of meal service: _____

First Meals Served to Children (cross off number as each child receives a meal):

151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170
171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190
191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210
211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230
231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250

Total first meals: _____ [2]

Second meals served to children:

1 2 3 4 5 6 7 8 9 10

+ Total second meals: _____ [3]

Meals served to program adults:

1 2 3 4 5 6 7 8 9 10

+ Total program adult meals: _____ [4]

Meals served to non-program adults:

1 2 3 4 5 6 7 8 9 10

+ Total non-program adult meals: _____ [5]

= Total Meals Served: _____ [6]

+ Total damaged/incomplete/other nonreimbursable meals _____ [7]

+ Total leftover meals (subtract [6] and [7] from [1]) _____ [8]

= Total (add [6] + [7] + [8]): _____ [9]

Line [9] should be equal to line [1] on the first page

Number of additional children requesting a meal after all available meals were served:

21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40

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Instructions

Each site must take a point-of-service meal count every day. The point of service is the moment in the SSO operation where staff can accurately determine that a reimbursable meal has been served to an eligible child.

1. Line **[1]** equals the **total meals** available, which equals the number of meals received or prepared plus the number of meals available from the previous day.
2. Line **[2]** equals the **total number of first meals** served to children. Cross out each number as a child receives a meal. Include any teenagers, ages 18 and under, paid or unpaid, who are helping at the site. Note: If the site serves more than 150 children, use page 2 and print the form two-sided. If the site serves 150 children or less, use only page 1.
3. Line **[3]** equals the **total number of second meals** served to children. Note: Reimbursable meals are limited to 2 percent of the total number of first meals served.
4. Line **[4]** equals the **total number of meals served to program adults**. "Program adults" are adults who work directly as part of the food service operation. This includes all adults who prepare meals, serve meals, clean up or supervise the children. This does not include teenagers ages 18 and under who may perform these tasks at the site. Meals for ages 18 and under are fully reimbursable and are counted on line 2.
5. Line **[5]** equals the **total number of meals served to non-program adults**. "Non-program adults" are adults who are not directly involved in the operation of the food service, including any sponsor administrative staff such as monitors or sponsor directors, or state or federal reviewers.
6. Line **[6]** equals the **total number of meals served**, which is the sum of lines 2 through 5.
7. Line **[7]** equals the **total number of meals that are unusable** because they are damaged, incomplete, or otherwise nonreimbursable.
8. Line **[8]** equals the **total number of leftover meals**, which is calculated by subtracting lines **[6]** and **[7]** from line **[1]**.
9. Line **[9]** equals the **sum of lines 6, 7 and 8**. It accounts for all meals and should equal line **[1]**.
10. Use the "Site Supervisor's Comments" section to record the number of children requesting a first meal after all available meals were served. This information is helpful for adjusting meal orders upward.
11. The site supervisor must **sign and date** at the top of the meal count form.

Maintain this form on file for the administrative review of the school nutrition programs, according to the U.S Department of Agriculture's (USDA) records retention requirements. For more information, refer to the Connecticut State Department of Education's (CSDE) resource, [Records Retention Requirements for the School Nutrition Programs](#).

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For information on the SSO, visit the CSDE's [SSO](#) website or contact the [Summer Meals staff](#) at the Connecticut State Department of Education, Bureau of Child Nutrition Programs, 450 Columbus Boulevard, Suite 504, Hartford, CT 06103-1841. This document is available at https://portal.ct.gov/-/media/sde/nutrition/ss0/daily_meal_count_form_ss0.pdf.

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To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or
2. fax: (833) 256-1665 or (202) 690-7442; or
3. email: program.intake@usda.gov

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